

CALIFORNIA LATINO CAUCUS



LATINO LEGISLATIVE CAUCUS



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How This Year's Budget Will Impact Latinos in California

In 2007, California leaders declared the “year of health” and in 2008, our state’s leaders proclaimed the “year of education.” As this year’s budget closes, we find ourselves once again on square one. The Governor’s May Revise proposes a combination of spending reductions and revenue modifications to address the **current \$17.2 billion budget gap** and to provide a reserve of \$2 billion. Proposed solutions include reductions and elimination of funding in the areas of K-14 education, higher education, housing and transportation, consumer protections, health and human services, and environmental protections and natural resources. With the Latino community composing nearly 36% of California’s population, the proposed drastic cuts will undoubtedly put some of the most vulnerable Latino communities at risk.

The Facts:

- 46% of all California K-12 students are of Latino descent.
- Nearly half of all Medi-Cal enrollees are Latino children and families.
- Over half of the Healthy Families program recipients are Latino children.

With Latino students comprising nearly half of California’s K-12 student population, and with a big majority opting for the more affordable community college after graduating from high school, K-14 funding is not only of great importance to our community, but also to California’s economic future. Funding for

UC and CSU institutions was essentially left untouched for the current year and will continue at the same level for 2008-09. However, the May Revise does not meet higher education needs for projected student enrollment and results in increased costs. An increase to student fees creates an even higher financial burden for Latino students, posing an even stronger barrier for students to pursue higher education.

Since California already has one of the lowest reimbursement rates for Medi-Cal providers in the nation, the Governor’s proposal to reduce and delay payments to Medi-Cal providers will only become an even greater disincentive to accept Medi-Cal patients. Through programs like Healthy Families, Latino children have been able to receive much needed health care services, especially dental care. The proposed program cuts and increases in family premiums will erode the already limited and fragile access these children have to health care.

An estimated 30% of Latino families living in poverty face challenges in enrollment in health care programs. These are often economic and documentation challenges. The proposed cuts to Medi-Cal and Healthy Families only exacerbate an existing problem. Whether seen from a social or economic perspective, it is in everyone’s interest to produce a well-educated and healthy community.

-- By Nora Vargas, Executive Director
for the Latino Issues Forum.

Francisco Silva named General Counsel of the California Medical Association

On Wednesday, June 4th the Latino Caucus held a reception in the Maddy Lounge of the State Capitol to honor Francisco Silva, the recently promoted General Counsel of the California Medical Association (CMA). Prior to his promotion Francisco was as an Associate Director for Government Relations at CMA, Vice President and Counsel for Government Affairs for the California Apartment Association, an attorney at the office of Downey Brand LLP and judicial clerk

for a Federal District Court Judge. Francisco is, however, no stranger to the building. He previously worked as a consultant for the Assembly Budget Committee and as a law clerk in the Office of Legislative Counsel. At the reception, Francisco was welcomed by many of his friends inside the Capitol, including ten members of the Caucus. Incoming Senate Pro-Tem Darrell Steinberg, and a friend from across the aisle, Senator Abel Maldonado, was present along with Mr. Silva's family to honor him for his achievement.

"New Redistricting Initiative Likely for November Ballot

Concerns Raised by Major Civil Rights Groups

The "California Voters First Initiative," by Common Cause will likely go before the voters in November. Common Cause supports the creation of independent redistricting commissions to draw legislative district lines. The signatures submitted by the group are pending verification by the Secretary of State and local elections officials.

The proposal would shift authority to draw district lines for the State Legislature and Board of Equalization from the Legislature to a 14-member commission. The State Auditor would randomly select eight of the commission members and those eight would select the remaining six from a list prepared by the State Auditor. The measure would require five Democrats and five Republicans to be appointed along with four members who are not affiliated with either party. The measure would establish a set of redistricting criteria to guide the line-drawing process. Congressional district lines would continue to be drawn by the Legislature.

The Mexican American Legal Defense and Educational Fund, NAACP Legal Defense and Educational Fund, National Association of Latino Elected and Appointed Officials Educational Fund and William C. Velasquez Institute recently announced their opposition to the "California Voters First Initiative" because it fails to provide effective reform and jeopardizes access of Latinos and other minorities to the redistricting process.

Among their key concerns are:

- 1) The random selection process would not result in a diverse commission. There is no guarantee that either the applicant pool or the commission itself will be diverse. At a time when the Legislature has become increasingly representative of California's diversity, the measure contains no mechanism for ensuring diversity.
- 2) The separation of Congressional and state legislative line drawing would make it considerably more difficult for community groups to provide meaningful input into two separate and simultaneous processes. The resources and personnel of community organizations are already stretched during the redistricting process. Low income and working class communities will be hard pressed to attend two distinct sets of meetings to testify on their communities of interest.
- 3) Finally, they object to the redistricting criteria because they believe it precludes full implementation of the Voting Rights Act in the creation of legislative districts. The most troublesome of the criteria in the initiative is nesting – where two assembly districts create one senate district – which in the past tended to diminish the ability to achieve full representation for minority communities.

It is a constitutional right that Latinos be able to elect candidates of their choice to represent them in the legislature. It is imperative that everyone have a voice and a hand in the redistricting process. Redistricting reform is needed but it must be real and effective reform that ensures California's diversity is represented.

Quote of the Month:

"But the anger is real; it is powerful; and to simply wish it away, to condemn it without understanding its roots, only serves to widen the chasm of misunderstanding that exists between the races."

--Barack Obama



Assembly Member's De León and Coto congratulate Mr. Silva on his recent promotion.



Assemblymember Joe Coto, Chair of the Latino Caucus, introduced Mr. Silva to all the guests at the reception hosted by the Latino Caucus.



There was standing room only at the reception for Francisco Silva

Upcoming
Events

Tuesday, June 17

Latino Caucus
Members Only
Meeting 11:00 am
at the State Capitol

Monday, June 16

California Latino
Youth Leadership
Project (CLYLP)
Annual Golf
Charity
Tournament at Teal
Bend: For more
information, please
contact: Lennies at
(916)524-9874

**Thurs. & Friday,
August 7th & 8th**

Latino Caucus
Statewide Health
Summit
Los Angeles, CA

For more
information, please
contact:
916-319-2023

Coming this Fall

Latino Caucus
Economic
Development
Summit

“Diversifying California’s Health Workforce: An Opportunity to Address Health Workforce Shortages”



The California Healthcare Workforce Diversity Advisory Council, an advisory body to the Administration, recently released a report that projects shortages for the state’s healthcare workforce. “Diversifying California’s Health Workforce: An Opportunity to Address Health Workforce Shortages” identifies the shortcomings of the current workforce and provides short-term recommendations to address California’s health professional shortages, especially among underrepresented groups.

The report identifies two important issues that impact the delivery of health services to Californians. First, there is a mismatch between California providers and consumers. California’s health professions workforce does not reflect the state’s demographics with respect to racial and ethnic composition and language proficiency. For example, Latinos comprise more than a third of the state’s population, but they make up 5.7% of nurses, 5.2% of physicians, and 7.6% of psychologists in California. Second, California is facing looming health professional shortages. Studies indicate that California will need 47,600 additional nurses by 2010 and 5,000-17,000 physicians by 2015.

The under representation of racial and ethnic groups in California’s health workforce is an acute problem. These communities are less likely to have an adequate supply of health providers which significantly impedes access to care. A

2003 study by the Institute of Medicine found that communities of color suffer higher levels of sickness, disability, and premature death.

The report offers a series of recommendations including:

- Developing a comprehensive, multi-year strategy and implementing a plan to advance healthcare workforce and diversity in California;
- Support local, regional and statewide public/private partnerships that enroll, retain and graduate underrepresented students, and work with regional consortia to increase underrepresented students in undergraduate and graduate programs;
- Pursue public/private partnerships to increase loan repayment availability for students and faculty and that increases resident and clinical placements in rural and urban/inner city areas with disproportionate needs.

The report is available at
<http://www.oshpd.ca.gov/HWDD/pdfs/WorkforceDiversityReport.pdf>



“Cultural Barriers to Accessing Mental Health”

For every 100,000 Latinos in the United States there are 29 Latino mental health professionals. The large disparity of ethnic medical professionals and the fact that mental health continues to be a taboo subject in the Latino community are two of the problems deterring Latinos from seeking mental health services. As a result, the California Latino Legislative Caucus in conjunction with the Latino Coalition for a Healthy California (LCHC) held a policy briefing on Thursday, June 5 at the State Capitol.

With the passage of Proposition 63, the Mental Health Services Act (MHSA), in 2004, the voters affirmed the importance of equitable access to mental health services. Latinos are in a position to benefit from MHSA because 51% of prevention funding is set aside specifically for children. Latinos do not traditionally knock on the mental health door. As a result, the MHSA has established programs and developed strategies to contact Latinos where they are and encourage them to use mental health services when needed. Utilizing schools, primary care clinics, workplaces, and community based health organizations as points of contact to the Latino community, the outreach efforts will continue drawing-in Latinos who have historically been absent from receiving these services.

In comparing rates of mental health coverage, only 67% of insured Latinos are covered, for mental health services, while over 88% of non-Hispanic Whites are. Non-Hispanic Whites are also 3 times as

likely to use mental health services and 2 times more likely to take prescription medicines to address and manage mental health issues. Generally, Latinos prefer to keep problems in-house and handle them within the family. This sentiment is best described through the Spanish saying “*No se lava la ropa en casa ajena,*” meaning “one must not wash one’s dirty clothes in someone else’s home.”

At the policy briefing, also discussed were the higher rates of mental illnesses reported among U.S.-born and long-term Latino residents than among recent Latino immigrants, and the increase in mental health concerns among Latino immigrants as they acculturate. It was implied that the longer one is in the U.S. the more likely one will suffer adverse mental health illness. Also discussed was the effect of the transnational family structure, where some members of the family are in the U.S. and the others are abroad, has on the mental health stability of family members. It was suggested that when dealing with immigrants seeking services, the health professional should ask about their families abroad and determine how it is affecting their mental health.

Without culturally competent health professionals who can speak their language, understand their traditions, and without cultural specific programs aimed at issues that predominate in the Latino community, the comfort level between patient and doctor will not be there and Latinos will continue to be further deterred from accessing mental health services.

WEB ADDRESS

<http://democrats.assembly.ca.gov/LatinoCaucus/>

CAPITOL OFFICE:

State Capitol, P.O. Box 942849
Sacramento, CA 94249-0023
Phone: (916) 319-2023
Fax: (916) 319-2123

For more information, please contact Minnie Santillan at 319-2023 or minnie.santillan@asm.ca.gov



Assemblymember Arambula was the Keynote Speaker at the Mental Health Policy Briefing.



There were many interested participants at the Mental Health Hearing. It was a huge success!

“La Verdad”

- In 2007, Hispanics’ disposable income exceeded \$860 billion, a figure that will balloon to more than \$1.2 trillion by 2012, according to the Selig Center for Economic Growth at the University of Georgia.
- In 2007, the Hispanic consumer market in the U.S. was about the same size as Mexico’s entire economy, in terms of its GDP.
- The Hispanic labor force will reach almost 27 million by 2016 – a 30% increase over 2006.